



SAFE DEPOSIT BOX
INSURANCE COVERAGE, LLC

Safe Deposit Box Insurance Application

Safe deposit box renters should consider insuring their valuables against loss or damage. To sign up for coverage, fill out the application below, and return your response via email (rachael.romano@sdbic.com), by fax (630-883-8773), or by mail (SDBIC, PO Box 724, Elgin, IL 60121). Or call us at 224-227-6181 to speak with a customer service representative.

Step 1: Review Enclosed Program Overview

Step 2: Select Your Coverage Amount From Pricing Grid Below

Select One	Coverage Limit	Annual Premium	Select One	Coverage Limit	Annual Premium
<input type="checkbox"/>	\$5,000	\$25		\$225,000	\$630
	\$10,000	\$45		\$250,000	\$700
	\$15,000	\$60		\$275,000	\$770
	\$20,000	\$75		\$300,000	\$840
	\$30,000	\$100		\$325,000	\$910
	\$40,000	\$125		\$350,000	\$980
	\$50,000	\$140		\$375,000	\$1,050
	\$75,000	\$210		\$400,000	\$1,120
	\$100,000	\$280		\$425,000	\$1,190
	\$125,000	\$350		\$450,000	\$1,260
	\$150,000	\$420		\$475,000	\$1,330
	\$175,000	\$490		\$500,000	\$1,400
	\$200,000	\$560			

- Coverage limits up to \$500,000 instantly available online at www.sdbic.com or by calling a customer service representative toll free at 224-227-6181.
- Confirmation of your coverage will be mailed to you with a copy of your policy. Coverage is effective when payment is received.
- Coverage limits can be changed by you at any time. You may also cancel at any time.

Step 3: Complete Basic Personal Information

Name (Title, First and Last): _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: ____/____/____ Phone: _____ Email: _____

Branch Location (City and Street): _____ Box Number (Last two digits): _____

Step 4: Select Payment Method

Check Enclosed

OR

Automatic Debit

Checking Savings

Routing #: _____

Account #: _____

OR

Credit Card

Visa MasterCard Discover

Card #: _____

Exp Date: ____/____ Security Code: _____

I authorize SDBIC to electronically debit my account for the full amount of the selected annual premium on the effective date of coverage provided in the policy you will receive by mail. A renewal notice and invoice will be sent to you 30 days prior to your policy expiration. Coverage renews automatically by the method you provided above until cancelled. You may cancel your coverage by calling 224-227-6181.

Step 5: Sign to Authorize Purchase

Authorized Signature: _____
(required for purchase, please type your name here)

Date: ____/____/____

Insurance is offered through Safe Deposit Box Insurance Coverage, LLC, a licensed agent and is underwritten by XL Specialty Insurance Company. Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison. Any person who knowingly and with intent defrauds any insurance company is subject to criminal and civil penalties. The information you provide will be shared for the limited purpose of issuing the policy. All information is maintained in strictest confidence in accordance with state and federal law.



SAFE DEPOSIT BOX
INSURANCE COVERAGE, LLC

Store It. Insure It.
Making the safest places even safer.
sdbic.com / (224) 227-6181

Summary of Policy Terms

Covered Perils

The coverage insures property in the safe deposit box against loss, damage or destruction caused by fire, water damage from floods (such as ground water seepage or leaking, water or sewage from the institutions plumbing or sprinkling systems), hurricane, tornado, earthquake, avalanche, landslide, mudslide, sinkhole, or other natural disaster or as a result of explosion, terrorist act, or robbery or burglary. There must be an identifiable event to trigger coverage. If there is no explanation for a claimed loss, such mysterious disappearances are not covered.

Covered Property

Anything you can place in the safe deposit box that is legal for you to own or possess is covered including gold, cash, silver or other precious metals, diamonds, currency, gold certificates, bank notes, coins, bonds, securities, jewelry, rare books, stamps, historical documents, lithographs, drawings, sports cards and memorabilia, fine art, antiques, firearms, and any type of collectible.

Each policy also provides \$3,000 of coverage to assist you in obtaining replacements for any important papers in the safe deposit box such as titles, wills, deeds, immigration papers, passports, discharge orders or other documents or personal mementos. This \$3,000 of coverage is NOT in addition to the coverage but is included and if claimed will then be deducted from the overall limits of the coverage.

If a friend or family member has given you property to store in the safe deposit box, that property is fully insured as long as it is legal to possess.

You may add or remove property from the safe deposit box during the policy term without providing notice to SDBIC. To be insured, the property must be in the safe deposit box in the vault, or safe, of the institution at the time of the loss. There is no coverage for property outside the safe deposit box.

Coverage Amount

Each safe deposit box holder selects the amount of coverage they wish to carry on the property in the box. Neither disclosure of the contents of the box nor an appraisal is required to obtain coverage.

Premium

The premium is set annually based on the coverage amount selected. The policy is effective on the date the premium is received, unless you select a date in the future for coverage to commence. You may terminate the policy at any time by contacting SDBIC. The policy will automatically renew each year until cancelled. You will be provided notice within 30 days of the expiration that the policy is being renewed.

Claims/Claim Settlements

Notice of a loss should be provided as soon as the insured discovers, or becomes aware of, the loss. You will be asked to complete a claim form describing the nature of the loss with (i) your estimate of the value of the property at the time of the loss, (ii) a list and description of the property in the box, and (iii) any other supporting documents you have relative to the property in the box at the time of loss. You will be paid the cost to repair or replace the property in the box up to the limits of the policy. Property should not be removed from the safe deposit box until directed by your institution or the insurance representative. An inspection of any remaining property or a third-party cost to repair the property may be required. A settlement will be paid within 30 days after the amount of the loss is determined. No claim can be made within 14 days of the inception of the initial policy for a loss due to a hurricane or flooding. This limitation does not apply to renewal policies.

Refer to Policy

The above is intended to be a summary and does not list or discuss all terms and conditions. Please refer to the policy for additional terms. To the extent anything in this description is inconsistent with the policy terms, the terms of the policy are controlling.